

MAR 2 7 2012

Mr. Michael Bernatz General Services Administration 450 Golden Gate Avenue, 5E San Francisco, California 94102

Dear Mr. Bernatz:

Enclosed is a Reimbursable Work Authorization (RWA), FAC-12-5019 for the General Services Administration (GSA) to acquire space to house the (b) (7)(F)

accordance with the SFO and special requirements. The funding is provided to cover all TI costs above the tier allowance, and other project cost including, but not limited to security, moving, cabling and GSA fees associated with the project.

The RWA has been signed and certified for funding in the amount of \$1,027,646.00. (NTE) Please sign and return a copy to this office. Our mailing address is as follows:



The RWA processing fee should be deducted from the total amount of the project. The remaining balance of the RWA should be used for the goods and services requested.

We expect the GSA Project Manager to coordinate the project milestone schedule, budget and expenditures with the project Managers to ensure that the project remain on schedule and within the established budget.

Mr. Michael Bernatz Page 2

The Project Manager for this project is

She can be reached a (b)(6) (b)(7)(C)



Enclosure(s)

REIMBURSABLE WORK AUTHORIZATION			Unless specified otherwise, the authority for this agreement is 40 U.S.C. § 592(b)(2).					
(See instructions on Page 4)								
1. DATE OF REQUEST (2. RWA NUMBER (GSA Use Only)			3. TYPE OF REQUIREMENTS (GSA Use Only)					
4. AGENCY AND BUREAU NAME			SEVERABLE NON-SEVERABLE GOODS					
(b)(7)(F)			5. WORK LOCATION (b) (7)(F)					
6A. AGENCY CONTACT NAME								
(b)(6) (b)(7)(C)			SE ACENCY CONTACT'S ADDRESS					
6B. AGENCY CONTACT'S TELEPHONE	NUMBER		(D)(7)(F)					
(b)(6) (b)(7)(C)								
6C, AGENCY CONTACTS E-MAIL (b)(6) (b)(7)(C)	7. DESCRIPTION OF REQUIREMENTS (attach Statement of Work, as necessary)							
6D. AGENCY CONTACT'S FAX NUMBER			RWA for the General Services Administration to acquire space to					
(b)(6) (b)(7)(C)	house the (b)(7)(F)							
8, AMENDMENT	9A. BILLING TYPE	9B. BILLING TERMS	(b)(7)(F) (b)(7)In accordance with the SFO and special requirements. The					
RWA amendment provided to change total authorized amount by	0	M	funding is provided to cover all TI costs above the tier allowance, and					
\$ from \$	\$ from \$ to \$.			other project costs including, but not limited to security, moving, cabling and GSA fees associated with the project.				
		10C. REQUISITION IDENTIFICATION NUMBER						
(b)(7)(F)	(DOD ONLY)	ADM120072		12.4.484.444	1			
13A, AGENCY ACCOUNTING DATA (Limited	to 130 characters)	13B, AGENCY	11. REQUESTED WO	ORK DATES	12. AGENCY CERT	IFIED AMOUNT		
(b)(4)		FUND YEAR	A. START B. COMPLETION		1.027.646			
		2012	14A. AGENCY BILLING CONTACT E-MAIL ADDRESS					
13C. FUND TYPE Please check Fund Ty check RECOVERY ACT - see instruction		DATE OF	(b) (7)(F)					
ANNUAL APPROPRIATION X	IO-YEAR APPROPRIATION	OBLIGATIONAL AUTHORITY	14B. AGENCY FINANCE BILLING OFFICE					
MULTIPLE YEAR	RECOVERY ACT		(b) (7)(F)					
13E. AGENCY/CUSTOMER BUSINESS		TOMES OFFICE AUGISTS	14C. STREET ADDRESS					
PARTNER NETWORK/DATA UNIVERSAL		TOMER ORDER NUMBER	(b) (7)(F)					
NUMBERING SYSTEM NUMBER (BPN/DUNS) (b)(4)	FAC125019		14D. CITY (b) (7)(F)		14E, STATE	14F. ZÍP CODE (b) (7)(F)		
13G. TREASURY ACCOUNT SYMBOL			15A. FUNDING AGENCY CODE (FPDS) 15B. FUNDING OFFICE CODE (FPDS)					
(b)(4)	(b) (7) (b) (7)(F)							
GENERAL SER	VICES ADMINIS	STRATION INTERN	AL CUSTOMER	OR INTERFUND		.Y		
16. FED CODE 17. PEGASYS DOCU		18, PEGASYS ACCOUR			20. INTERFUND YEA			
		*						
By its signature below, the Reques statutory or regulatory requirements	ting Agency certi	fies (a) that all specia	funding and procu	rement requiremen	ts of the Requesting	g Agency, including		
reviews/approvals required by the R	equesting Agency	prior to placing this R\	MA with GSA have I	been completed; (c)	that the Requesting	Agency has a bona		
fide need in the current fiscal year for the work described in this RWA; (d) that the funds identified by the Requesting Agency in this RWA are legally available for further obligation and expenditure by GSA in furtherance of the work described in this RWA; and (e) that the Requesting Agency accepts the								
General Terms and Conditions set f								
facts and circumstances of individua								
(b) (6)	EVING OFFICIAL		21B.DATE 2/2/1/2					
21C. NAME OF FUND'S CERTIFYIN	NG OFFICIAL		21D. CERTIFYING	OFFICIAL'S E-MA	IL ADDRESS	1/12		
(b)(6) (b)(7)(C)			(b)(6) (b)(7)(C					
21E. TELEPHONE NUMBER OF CE	MBER (b)(6)	(b)(7)(C)	EXTENSION					
NOTE: The General Services Administration will bill in accordance with Federal Management Regulation (41 CFR) Section 102-85.195. It								
is anticipated that the Agency Certified Amount provided in Block 12 will be sufficient to complete the work requirements of the Requesting Agency. If it is determined that the funds provided by the Requesting Agency will be insufficient to complete the work requested under this								
agreement, GSA will seek an amended RWA from the Requesting Agency for additional funding prior to incurrence of costs above the								
Agency Certified Amount.	•17							

						RWA NUMBER (GSA Use Only)					
frame											
		FOR GENE	ERAL SERVICES	ADMINIST	RATION US	SE ONLY					
22. PROJECT CONTROL NUMBER	23A. SUMMA	ARY ORGANIZATION CODE				BUDGET ACTIVITY 23D. WORK ITEM (Check One)		BER			
						PG61 X PG80					
23E. CUSTOMER BILLING	OFFICE ADDI	RESS CODE (BOAC)	23F. CORRESPONDENCE SYMBOL			23G. AGENCY BUREAU CODE					
		9PIPRC			7004						
24A. AGREED-UPON INITIAL CONTRACT AWARD DATE 24B. ESTIMATED COMPLETION DATE		25. BRIEF PRO	JECT DES	CRIPTION (limited to 25 charac	ters)					
		cost above tenant improvement allowane									
			COST COST TO TOUTH THE PROJECT TO THE COST								
26. ACTION (Check one)			27. PLEASE CHECK IF APPROPRIATE								
⊠ NEV	J		HEATING OPERATIONS AND TRANSMISSION DISTRICT								
□ CAN	CELLED		(HOTD) - NCR Only								
			□ ∘	OVERTIME UTILITIES							
∐ CHA	NGE		☐ PLANS ATTACHÉD								
COM	1PLETE		∏s	SUPPLEMENTAL LEASE AGREEMENT							
28A. ORGANIZA	ATION		UILDING	28C. FI	JNCTION	28D. OBJECT	28E. TOT	ΓΔΙ			
CODE		NUN	MBER		ODE	CLASS	(b)(4)	(b)(4)			
(b)(4)				PG41	5	25	(D)(+)				
	····			P69K	7	11					
				1993	> _	25					
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	~~~					L					
						28F. GRAND TO	TAL 1,027, U	144.01			
29A. GSA PROJECT CONT	ACT NAME		***************************************		10.1111						
Raichae	Par-	ter									
29B. GSA PROJECT CONTACT PHONE NUMBER				29C. GSA PROJECT CONTACT E-MAIL ADDRESS							
415-522-3259				rachael. Porter Egsa.gov							
0)(6)			OB. DATE			ICIAL'S PHONE NUMBI	ER				
6/10/12				415-522-2736							
SUD. SOM AFFICOVING OFFICIALS TVAINE				31. SELLER/GENERAL SERVICES ADMINISTRATION BUSINESS PARTNER NETWORK/DUNS NUMBER (BPN/DUNS)							
MCAAN S	FICIAL'S E-MA	IL ADDRESS			S. TO THOMOLIN	(=. 1, 2010)					
megan. Str	efani (	2950.00	V								
32A. CERTIFICATE OF COMPLETION SIGNATURE				32B. SIGNER'S NAME (Type or Print) 32C. COMPLETION I			ON DATE				